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**United Nations Children's Fund**
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Item 6 (a) of the provisional agenda*

# Country programme document

## Bangladesh

*Summary*

The country programme document (CPD) for Bangladesh is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of $90,000,000 from regular resources, subject to the availability of funds, and $250,000,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2017 to 2020.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the annual session of 2016.

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## Programme rationale

1. Bangladesh enters the era of the Sustainable Development Goals with a solid development base arising from progress on several Millennium Development Goal targets, including underweight children and hunger, gender parity in primary and secondary education, child and maternal mortality and access to improved drinking water and improved sanitation. The seventh five-year plan (2016-2020) of the Government of Bangladesh seeks to increase economic growth that is inclusive, pro-poor and adapted to an economy progressively powered by urban productivity and environmental sustainability. The plan also outlines targets for education, health, nutrition, access to safe water and sanitation, and gender equality.

2. Despite this considerable progress and the Government's strong commitment to reducing child poverty, equitable results for children, who comprise 40 per cent of the population, continue to be a significant concern. While the national poverty rate stands at 31.5 per cent, it varies from 46 to 26 per cent in Rangpur and Chittagong divisions, respectively. Subnational disparities are also evident in the coverage of basic social services between rural and urban locations and geographic regions and by gender and wealth. In particular, the provision of high-quality basic services to the urban poor and areas that are hard to reach or vulnerable to climate change remains a key challenge for achieving the Government's objective to inclusively distribute its prosperity.

3. Overall, the fast rate of economic development, propelled by the national goal of becoming a middle-income country by 2021, risks outpacing the country's human development and social change. The performance of Bangladesh in the global Human Development Index shows a 47 per cent improvement between 1990 and 2014, but even so, it remained ranked at 142 out of 188 countries. Without concerted efforts to accelerate and consolidate social gains, Bangladesh risks losing a unique opportunity to harness the potential for fast-tracked inclusive economic growth resulting from the demographic dividend.

4. A recent analysis of the impact of climate change on children recognized Bangladesh as one of the most climate change-vulnerable countries globally. International observers predict that the greater frequency and severity of natural hazards, namely the melting of the Himalayan glaciers, rising sea levels, a reduction in cultivable land and greater water scarcity, will adversely affect Bangladesh, leading to greater vulnerability for communities. Children are more likely than adults to die or be injured during disasters and, as a result of flooding, experience prolonged school closures as well as illness due to unsafe drinking water and skin diseases from washing with saline or polluted water. In addition, families who lose their livelihood due to climate change may be forced to migrate, often to urban slums, which in turn lack adequate basic services. In recent decades, the Government has invested more than $10 billion to make the country less vulnerable to natural disasters.[1]

5. Bangladesh has witnessed rapid and large-scale urbanization in the past 20 years, with more than 50 million people currently living in urban areas. Projections suggest that in 30 years, half the country's population will reside in urban areas.

[1] Government of Bangladesh, *Bangladesh Climate Change Strategy and Action Plan 2009* (Dhaka, 2009).

Employment opportunities, driven by the growing ready-made-garment sector, along with the forced migration of communities affected by disaster and climate change, have led to unplanned urban growth without the adequate provision of basic services. Such initiatives as the National Urban Poverty Reduction Programme support the strengthening of capacities at the municipal level to address rapid urbanization. However, sectoral policies are designed primarily for rural service delivery, and urban policies are still under development, with the notable exception of the National Urban Health Policy (approved in 2014). Against this backdrop, the private sector and non-governmental organizations (NGOs) have stepped in to fill the gaps in social services. Such services are often unaffordable for low-income users, however, and present continued challenges in terms of quality and sustainability.

6. Despite the progress of Bangladesh regarding health outcomes, the agenda for ensuring the well-being of young children and their mothers is still unfulfilled. The significant reduction in under-five mortality, from 144 (1990) to 38 (2015) per 1,000 live births,[2] has been hampered by inferior progress in neonatal mortality, which fell only from 63 (1990) to 23 (2015) per 1,000 live births.[3] In addition, the maternal mortality ratio stands at 176 per 100,000 live births,[4] with most deaths due to delivery by unskilled birth attendants at home and a lack of comprehensive emergency obstetric care from a skilled provider at a medical facility. Progress in eliminating childhood stunting has decreased, with rates falling from 68 to 43 per cent between 1986 and 2007,[5] but declining at a slower rate from 2007 to 2014, from 43 per cent to 36 per cent.[6] Furthermore, it is estimated that 38 per cent of all children are now born with a low birthweight.

7. Ensuring the use of safe drinking water remains a challenge, as 41 per cent of the population drink water from sources with faecal contamination and 25 per cent drink water with a level of arsenic above international standards. Only 61 per cent of the population use an improved toilet facility and 59 per cent have a specific place for handwashing equipped with soap and water.[7] Data on safely managed sanitation, including emptying, transport and proper treatment, are lacking.

8. School-age children face significant challenges relating to their right to high-quality education and protection. According to the National Student Assessment (2013), only one in four children in grade 5 have the required competencies in mathematics and Bangla, and most schools do not have functional gender- or disability-responsive water, sanitation and menstrual hygiene facilities. A lack of safety and the high prevalence of sexual harassment and abuse in public places contribute to girls' dropout from schools. It is estimated that some 4.6 million

[2] Inter-Agency Group for Child Mortality Estimation, "Levels and trends in child mortality", 2015.
[3] Ibid.
[4] Inter-Agency Group for Child Mortality Estimation, "Trends in maternal mortality, 1990-2015", estimates by WHO, UNICEF, the United Nations Population Fund, the World Bank Group and the Population Division, United Nations Department of Economic and Social Affairs.
[5] Mercedes de Onis, Edward A. Frongillo and Monika Blössner, "Is malnutrition declining? An analysis of changes in levels of child malnutrition since 1980", World Health Organization (WHO) Bulletin 2000, 78 (10), and Bangladesh Demographic and Health Survey (BDHS) 2007.
[6] National Institute of Population Research and Training, Ministry of Health and Family Welfare, Bangladesh Demographic and Health Survey 2014 (Dhaka, 2015).
[7] UNICEF and WHO, *25 Years: Progress on Sanitation and Drinking Water: 2015 Update and MDG Assessment* (Geneva, 2015).

children of primary-school age are out of school,[8] most of them in urban slums and disaster-prone and hard-to-reach areas. Moreover, a recent survey estimated that 1.7 million children, mostly boys, are engaged in child labour, one in every four of them aged between 6 and 11 years.[9]

9. For adolescent girls and boys, a wide set of deprivations remain unaddressed. In spite of a 95-per-cent transition rate from primary to secondary education, only 46 per cent of children attend secondary school, the lowest proportion in South Asia.[10] Furthermore, only an estimated 6 per cent of schools have menstrual hygiene facilities, resulting in many adolescent girls missing up to five days of school per month. Child marriage remains widely accepted and extremely common, with 52 per cent of girls aged 20 to 24 married before age 18.[11] Adolescent nutrition remains an issue, with 29 per cent of girls malnourished and presenting high levels of micronutrient deficiencies.[12] This is particularly significant given that the adolescent birth rate stands at 113 per 1,000 live births, one of the highest worldwide.[13] Many married adolescents experience and accept physical and sexual violence (33 per cent of adolescent girls believe a husband is justified in hitting his wife).[14] Moreover, adolescent girls are vulnerable to trafficking and child marriage in the context of natural disasters, to which Bangladesh is highly prone.

10. Raising awareness and prioritizing investments for children's rights is a central challenge for Bangladesh. The Government's commitment to developing child-focused budgeting starting in the 2015/16 fiscal year has not yet been fully implemented. At the local and national levels, a lack of timely information on the effective coverage of social services affects the capacity of government to make informed policy decisions. Media reporting on children shapes public perceptions, but is frequently insensitive, especially when reporting on crimes committed against or by minors. The recent National Social Security Strategy, which seeks to consolidate 143 programmes into simplified life-cycle-based schemes, provides an opportunity to target child poverty, promote social equity and reduce leakages and inefficiencies.

11. Gender disparities in Bangladesh are rooted in the highly patriarchal nature of its society. Girls' secondary education is often interrupted due to child marriage, violence against girls and women is high (two out of every three women are subjected to physical violence from their husband during their lifetime) and participation by women in the labour force remains low, at 34 per cent.[15] The Government acknowledged the existence of gender inequalities in its eighth report on the Convention on the Elimination of All Forms of Discrimination against Women, however continues to maintain its reservation on article 2. While several laws and policies for the protection of girls and women exist (e.g., the Dowry Prohibition Act, 1980, and the National Women Development Policy 2011) implementation remains a challenge. Bangladesh has a strong women's movement,

[8] Bangladesh Multiple Indicator Cluster Survey (MICS 2012/2013) and projections from the Bangladesh Population and Housing Census 2011.
[9] Bangladesh Bureau of Statistics (BBS), Child labour force survey, 2013.
[10] MICS 2012/2013.
[11] Ibid.
[12] Ibid.
[13] BDHS 2014.
[14] BDHS 2011.
[15] World Bank, "Bangladesh development update", 2015.

combined with an active presence throughout the country of NGOs, whose involvement in policy reform and engagement at the community level contributes substantially to addressing inequities affecting girls and women.

12. While Bangladesh has ratified the Convention on the Rights of Persons with Disabilities, national laws, policies and services do not fully consider the disadvantages of people with disabilities, including children. Data on children with disabilities are limited and inconsistent, as the estimated proportion of children with disabilities ranges from 1.4 per cent[16] to 17.5 per cent.[17] Furthermore, gendered social norms and cultural beliefs lead to discrimination within the family, community and workplace. Given the limited reach of existing social protection systems, families are not able to respond to their children's needs or advocate for their right to survival, development and protection, and they are frequently unaware of existing services. Professionals in the health and education sectors are insufficiently trained to detect disabilities in young children, when they are at the age when intervention has the greatest effect, or to provide children with high-quality specialized care and services.[18]

13. In line with lessons learned from the previous country programme and confirmed by the evaluation of the strategic positioning of UNICEF in Bangladesh, investments will be made to strengthen the decentralized presence of the organization at the divisional level and to bolster disaster preparedness and response capability in coordination with the Government, civil society and other United Nations agencies. The evaluation recognized the ability of UNICEF to access high-level policymakers in Dhaka while also maintaining a strong presence in the field as some of its key comparative advantages. The central office in Dhaka will focus on programme design, management and technical oversight, with functional accountabilities for upstream policy work, direct implementation in urban slums and peri-urban activities in the capital. The seven divisional offices will work on the planning and monitoring of implementation and convergence at the field level. Geographical targeting will be guided by a set of multidimensional child deprivation indicators and subnational risk assessments and mappings. On the basis of lessons learned from the previous country programme, UNICEF will also strengthen its engagement with emerging issues, including climate change, building on the successful piloting of the managed aquifer recharge and the cookstove project, and with urban programming. This includes lessons from the pioneering deployment of district nutrition officers to support government systems in the identification and removal of barriers to tackling malnutrition, including the management of acute malnutrition.

## Programme priorities and partnerships

14. Consistent with the UNICEF Strategic Plan, 2014-2017, the overall goal of the country programme is to support the efforts of Bangladesh to advance the universal realization of the rights of children, particularly the most disadvantaged and excluded. These include children, adolescents and their communities living in poverty and areas that are hard to reach or vulnerable to climate change and disaster,

[16] Government of Bangladesh, Bangladesh Population and Housing Census 2011.
[17] MICS 2006.
[18] UNICEF, "Situation analysis on children with disabilities in Bangladesh", 2014.

those living in urban slums, living with disabilities or infected with, affected by or at risk of HIV/AIDS and those from ethnic and religious minorities.

15. The programme has been developed in close dialogue with the Government to ensure its alignment with the seventh five-year plan, sector plans and the in-country process to define Sustainable Development Goal indicators, as well as the United Nations Development Assistance Framework (UNDAF) 2017-2020, the concluding observations of the Committee on the Rights of the Child and lessons from the midterm review of the country programme. On the basis of a United Nations-wide agreement with the Government, the duration of the present country programme has been set to four years in order to further align United Nations planning cycles with the time frame of the national development plans.

16. In order to foster convergence in addressing multidimensional deprivations that affect children, the programme outcomes have been formulated following a life-cycle approach: (a) newborns/infants and their mothers, and young children; (b) children of primary-school age; and (c) adolescents. These programme outcomes will be supported by an overarching component (d) on social inclusion and an increasing awareness of children's rights. At the core of the results of UNICEF will be the strengthening of national and subnational capacities, including continued support in building systems that enhance effectiveness and sustainability, and addressing issues of equity, including gender, as well as cross-sectoral collaboration within UNICEF and between partners. Emergency preparedness and response, disaster risk reduction and climate change adaptation will be mainstreamed into the programmatic outputs and reflected in output indicators. The underlying assumptions are that children's rights, in particular for the most vulnerable children, remain a priority for the Government and development partners; that the Government recognizes the age-specific needs and deprivations across the different stages of the life cycle; and that the Government will undertake regular disaster-risk assessments and actions.

17. Strategic emphasis will be given to (a) evidence generation, policy dialogue and advocacy; (b) equity-responsive and resilient service delivery; and (c) partnership and participation. This mix of strategies aims to ensure a balance between upstream and downstream work against the background of the transition of Bangladesh towards middle-income status. It also reflects a lesson learned from past cooperation on the need to strengthen policy and advocacy in order to foster government ownership and sustainability, while nevertheless maintaining a presence in service delivery and demand generation. Risk-informed programming will be a key cross-cutting strategy to ensure the effective preparedness and response to natural and man-made disasters, with strengthened country capacities to analyse and manage risks, particularly relating to floods, droughts and the impacts of climate change, and to enhance community resilience and the capacity to deliver results for children in urban slums. This will include strengthened partnerships with local authorities and NGOs and engagement with the private sector for results beyond corporate social responsibility.

## Young children and their mothers

18. The overall vision for the success of this component is that infants, young children and their mothers and families will use high-quality social services in a

safe environment, and will be empowered to practise positive behaviours. The outcome will address challenges and national priorities by reducing neonatal mortality and morbidity, addressing childhood stunting, expanding birth registration and increasing the use of safe drinking water and basic sanitation facilities.

19. UNICEF will emphasize strategic advocacy for policy implementation, including strategies and guidelines to facilitate the operationalization of the comprehensive Early Childhood Care and Development Programme. Sectoral ministries and departments will be assisted to develop integrated, costed action plans and to advocate for increased resource allocations and use to reach the most deprived children and areas. As a member of the health sector consortium, and reflecting the approaches outlined in its Strategy for Health 2016-2030, UNICEF will continue to work closely with the Ministry of Health and Family Welfare to promote the shift of health systems based on vertical, disease-specific interventions towards universal health coverage, namely, a more comprehensive health-systems approach that incorporates a holistic consideration of children's right to health at all stages of the life cycle. UNICEF will also work with partners to increase the number of newborns registered as soon as possible following birth. The organization will advocate for the scale-up of innovative models for the realization of children's right to safe and disaster-resilient water and basic sanitation, including by working more with the private sector. In education, UNICEF will continue to advocate for the expansion of preschool services and for the integration of preschool into the education sector-wide approach. Furthermore, UNICEF will advocate for agricultural policies to include nutritional analysis and nutrition-sensitive interventions.

20. Services will be strengthened, with a focus on emergency obstetric care, to facilitate the scale-up of special newborn-care units and services for the prevention of mother-to-child transmission of HIV and for early infant diagnosis and treatment of HIV in selected target areas. UNICEF will promote the mainstreaming of the practices of the Early Childhood Care and Development Programme, using the 1,000-day approach to favour good nutrition during pregnancy; birth registration; early detection; interventions covering children with disabilities; the tackling of malnutrition, including micronutrient supplementation; and family and community support. UNICEF will continue to support the Government in the local adaptation of ready-to-use therapeutic foods into the roll-out of community-based management of acute malnutrition. Additionally, investments will be made in climate-resilient and cost-effective water, sanitation and hygiene (WASH) infrastructure and hygiene protocols in health facilities.

21. Evidence-based communication for development strategies, such as interpersonal communication, social mobilization, community engagement and media campaigns, as well as partnerships with local authorities, community-based structures, NGOs and civil society organizations, will be used to improve service utilization and household practices. Communication efforts will encourage families and communities to engage in dialogue with service providers and local authorities and demand high-quality social services.

## Girls and boys of primary-school age

22. The overall vision of success is that boys and girls of primary-school age will learn equitably in an environment that is healthy, safe and resilient. The outcome will, in particular, support the strengthening of the equitable coverage of inclusive formal and non-formal high-quality primary education and the prevention of violence against children in schools and communities.

23. Strategic advocacy will be carried out in support of bettering investments in the quality of education and ensuring children's progress to secondary education (formal and non-formal and second-chance education). Targeted research will generate evidence on the education returns relating to investment in WASH in schools, including the benchmarking of WASH facilities and practices, the promotion of handwashing and hygiene and the adoption of technical designs for inclusive and climate-resilient WASH in schools.

24. In order to address the disproportionate deprivations affecting minorities and children with disabilities, UNICEF and its partners will work at the policy level to promote the protection, education and integration of children with disabilities and to develop strategies to promote education for children from ethnic minorities. Following the recent approval of the Education in Emergencies framework by the Ministry of Primary and Mass Education, UNICEF will provide technical assistance for the revision of the primary-school curriculum as well as teacher training packages that will include disaster risk reduction (DRR) and emergency aspects.

25. UNICEF will support the development of gender-responsive, disaster-resilient service delivery models to improve the quality and continuity of primary education, including during disasters, and to reach the most marginalized and excluded girls and boys through such approaches as child friendly schools and gender-responsive, ability-based teaching and learning methods. In doing so, it will strengthen the capacities of relevant ministries as well as departments and agencies for better planning, implementation and monitoring through the use of data in order to promote accountability for children. Moreover, UNICEF supports the establishment of second-chance-education learning centres in emergency and non-emergency situations.

26. By means of advocacy and technical support, UNICEF will continue to contribute to strengthening the child protection system to address violence against children. Legal reform and advocacy will be carried out to ensure the further harmonization with the Convention on the Rights of the Child. The capacity of stakeholders will be developed to support the enforcement of the Children Act 2013 through the extension of functional referral systems that address violence against children. Technical assistance will be deployed to strengthen the core functions of the Ministry of Social Welfare to regulate, oversee and monitor child welfare. Furthermore, data collection and research will be undertaken on violence against and the abuse and exploitation of children, essentially to design interventions and strategies and to set targets to mutually monitor and report progress in ensuring the protection of all children.

27. Behaviour and social change communication aimed at parents, caregivers and key community leaders will focus on addressing behavioural and gendered sociocultural barriers and bottlenecks to keeping children in a stimulating environment and safe from such harmful practices as the acceptance of violence

against children in communities, at home or at school and addressing stigma and discrimination around disability. Communication efforts will also focus on enhancing community participation in school-level planning. Lastly, children themselves will be supported to seek professional care and to report incidents of violence through referral mechanisms and social protection schemes.

## Adolescents as agents of change

28. The overall vision of success for this outcome area is that adolescents will use high-quality basic social services in a safe, supportive and protective environment and will be active agents of behaviour and social change. The outcome area will focus on keeping adolescents in school, improving adolescent health and well-being, protecting adolescents from harmful practices, increasing their participation and ending child marriage. The outcome area will also focus on DRR and development.

29. At the policy level, UNICEF will strengthen national capacities to plan, budget, coordinate, implement and monitor a comprehensive, multisector national strategy for adolescents, sector-specific strategies and the costed National Action Plan to End Child Marriage. These efforts will be supported by the piloting of an adolescent index to track adolescent-sensitive indicators and advocate for their integration into national monitoring systems.

30. UNICEF will pilot a comprehensive package of adolescent and gender-friendly health, nutrition, HIV/AIDS, WASH and menstrual hygiene management and formal and non-formal education services and advocate for the increased investments needed to ensure the rights of adolescents. There will be an emphasis on improving access to adolescent-friendly health services and counselling in public health facilities in targeted districts, non-formal and vocational training and learning, and education in life-skills. UNICEF will continue to support cash transfers and social protection measures for at-risk adolescents and to protect those vulnerable to child marriage or mitigate the impact of child marriage on already-married adolescents.

31. A range of communication for development approaches will be used to inform and engage with adolescents and their families and communities on adolescent rights and the effect of harmful social practices. Through the expansion and strengthening of existing participation platforms, adolescents will be empowered to voice their concerns, access information, demand and use services, avoid risky behaviours and engage as active agents of change. Families and communities will be informed and mobilized to contribute to an enabling environment that protects adolescent rights.

## Social inclusion and increased awareness of child rights

32. The overall vision of success for this outcome area is to develop policies that address the structural causes of inequities in order to advance the realization and create awareness of children's rights. This outcome will focus on advocating for children's rights, increasing resources for investments in children, strengthening social protection and enhancing the capacity of national and decentralized structures

to voice and address children's issues, with a specific focus on gender, disabilities, urbanization and environmental sustainability.

33. UNICEF will support activities to promote child participation and the awareness of child rights, including through digital communication channels and a children's caucus in Parliament. The Ministry of Information will be supported to improve the policy environment and strengthen subnational capacities for community mobilization and engagement on child-related issues. Central to the work of UNICEF will be the dissemination of and follow-up on the concluding observations of the fifth periodic report of Bangladesh on the implementation of the Convention on the Rights of the Child and the Children Act of 2013, as well as partnering with the private sector on results for the most deprived children.

34. The Ministry of Finance will be supported to institutionalize child-focused budgeting as a mechanism to monitor investments in children and promote mutual accountability, coupled with sector-specific analysis of the quality of expenditures. Furthermore, UNICEF, in coordination with the Bangladesh Bureau of Statistics, will continue to monitor the situation on children, adolescents and women through multiple indicator cluster surveys and to support the national capacity to assess social service coverage through innovative real-time data collection mechanisms that inform decision-making, in addition to thematic surveys and analysis around emerging issues. UNICEF will support evidence generation and conduct advocacy for the full recognition and inclusion of children in the policy discourse on environmental sustainability and urban development. Greater emphasis will be given to identifying and documenting scalable innovations within and outside the UNICEF programme.

35. Local government structures at the division, district, upazila and union levels will be supported in order to identify and prioritize investments in children by means of evidence-based planning and monitoring. UNICEF will work with partners, especially the United Nations Development Programme and the World Bank, to build a strong network to enhance the capacity of local authorities in support of the outcome areas of the country programme.

## Programme effectiveness

36. The programme effectiveness component covers activities relating to programme management, including technical and strategic assistance. It also covers the cost of programme coordination and the management of cross-cutting issues for high-quality country programming and reporting. These include policy, guidance and technical support on such issues as performance monitoring, evaluation, external relations, public advocacy, DRR and climate resilience, field services, the harmonized approach to cash transfers, gender mainstreaming, supply and information technology as well as office compliance with carbon off-setting standards.

### Summary budget table

| *Programme component* | *(In thousands of United States dollars)* | | |
|---|---|---|---|
| | *Regular resources* | *Other resources* | *Total* |
| Young children and their mothers | 15 000 | 110 500 | 125 500 |
| Boys and girls of primary-school age | 20 000 | 37 500 | 57 500 |
| Adolescents as agents of change | 20 000 | 55 000 | 75 000 |
| Social inclusion and increased awareness on child rights | 20 000 | 20 000 | 40 000 |
| Programme effectiveness | 15 000 | 27 000 | 42 000 |
| **Total** | **90 000** | **250 000** | **340 000** |

## Programme and risk management

37. The country programme will be implemented within UNDAF 2017-2020. UNICEF contributes greatly to the UNDAF outcome: "develop and implement improved social policies and programmes that focus on good governance, the reduction of structural inequalities and the advancement of vulnerable individuals and groups". This is an area of joint programming with other United Nations agencies, including the United Nations Population Fund and the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), on child marriage. As Chair of the UNDAF Monitoring and Evaluation Group and the country focal point for the Sustainable Development Goals, UNICEF will directly contribute to improved coordination and coherence within the United Nations.

38. UNICEF will position itself to manage risks relating to natural hazards, the national political environment and diminishing aid flows due to changes in the global aid environment as well as the country's transition towards middle-income status. To mitigate these risks, UNICEF will continue to implement risk-informed programming and to manage and monitor the identified risks together with its partners; implement business-continuity measures during times of instability; and proactively engage with new donors, including by partnering with the private sector and nurturing relationships with existing donors. The Government's increased capacity to raise its own resources represents a significant opportunity, and UNICEF will continue to advocate for qualitative and quantitative improvements to social-sector budgets that benefit children.

39. The CPD outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and the resources assigned to the programme at the country level. The accountabilities of managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

## Monitoring and evaluation

40. The indicators in the integrated results and resources matrix and the integrated monitoring and evaluation plan will form the basis of results monitoring. Together with other partners, UNICEF will continue to invest in the capacity of the Bangladesh Bureau of Statistics and sectoral management information systems, to produce, analyse and disseminate high-quality data and to monitor progress towards national and international development goals, including through real-time innovative data-collection mechanisms that inform decisions and promote mutual accountability for the most deprived children. Biannual programme reviews will be used to take stock of the results achieved, identify opportunities and risks and make programmatic adjustments where needed.

41. On the basis of the findings of the 2014 formative evaluation of the Monitoring Results for Equity System of UNICEF (MoRES) and the Bangladesh case study, UNICEF and its partners will continuously assess barriers and bottlenecks to achieving programme results, in particular for the most disadvantaged groups. Wherever possible, this work will build upon existing data-collection systems through the analysis of child deprivations to promote national dialogue and policy actions.

42. Independent evaluations will be conducted and jointly managed with the Government for programme learning and accountability, as well as to provide evidence on innovative or pilot interventions prior to scale-up.

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## Annex

## Results and resources framework

## Bangladesh-UNICEF country programme of cooperation, 2017-2020

| |
|---|
| **Convention on the Rights of the Child:** articles 1, 6, 7, 13, 18-19, 23-24, 28-30, 32, 34 and 40<br><br>**National priorities:** *Health* – under 5 mortality and infant mortality; maternal mortality; immunization; skilled birth attendance; *Water and Sanitation* – safe drinking water for rural and urban populations, access to improved sanitation; *Nutrition* – underweight and stunting in children under five, exclusive breastfeeding; *Education* – net enrolment for primary and secondary levels, primary completion rates; *Protection* – ending child marriage. |
| **Sustainable Development Goals alignment:** 2, 3, 4, 5, 6 and 8; cross-cutting Goals: 10, 16 and 17<br><br>**UNDAF outcomes involving UNICEF:** Develop and implement improved social policies and programmes that focus on good governance, reduction of structural inequalities and advancement of vulnerable individuals and groups. |
| **Related UNICEF Strategic Plan outcome(s):** outcomes 1-7 |

| *UNICEF outcomes* | *Key progress indicators, baselines (B) and targets (T)* | *Means of verification* | *Indicative country programme outputs* | *Major partners, partnership frameworks* | *Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)* | | |
|---|---|---|---|---|---|---|---|
| | | | | | *RR* | *OR* | *Total* |
| 1. By 2020, women, infants and young children in Bangladesh, especially the most disadvantaged (with disabilities or living in urban, remote and disaster-prone areas), access and utilize high-quality social services in a safe environment, and their families are empowered to practise positive behaviour. | Women 15 to 49 years are attended at least four times during their pregnancy by any provider for reasons related to the pregnancy (percentage)<br>B: 31 (2014)<br>T: 40 (2020) | Demographic and Health Survey (DHS), health sector-wide approach | By 2020, policies and programmes are contributing to enhance an enabling environment for the realization of the rights of young children and their mothers.<br>By 2020, integrated services have been strengthened in national and subnational systems to support the well-being of infants, young children and their mothers.<br>By 2020, the quality of service delivery and the effective coverage of social services has improved for infants, young children and their mothers.<br>By 2020, communities and institutions have improved capacity and knowledge regarding essential household behaviours and practices that promote the overall well-being of infants, young children and their mothers. | Early childhood care and development policy, Ministry of Health and Family Welfare, national WASH strategy | 15 000 | 110 500 | 125 500 |
| | Live births attended by a skilled provider (percentage)<br>B: 42 (2014)<br>T: 65 (2020)<br><br>Lowest quintile<br>B: 27 (2013)<br>T: TBD (2020) | DHS, multiple indicator cluster survey (MICS) | | | | | |
| | Children 6 to 23 months receiving a minimum acceptable diet (percentage)<br>B: 23 (2014)<br>T: 27 (2020) | DHS | | | | | |
| | Proportion of households using basic sanitation facilities (percentage)<br>B: 61 (2015)<br>T: 70 (2020) | World Health Organization (WHO)/UNICEF Joint Multipurpose Programme for Water Supply and Sanitation | | | | | |

| *UNICEF outcomes* | *Key progress indicators, baselines (B) and targets (T)* | *Means of verification* | *Indicative country programme outputs* | *Major partners, partnership frameworks* | *Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)* | | |
|---|---|---|---|---|---|---|---|
| | | | | | *RR* | *OR* | *Total* |
| 2. By 2020, boys and girls of primary-school age, especially the most disadvantaged, live and are learning equitably in an inclusive, healthy, safe and resilient environment. | Schools with adequate water, sanitation and hygiene (WASH) facilities. Schools with: (a) safe drinking water and (b) functional toilet (percentage)<br>B: (a): 83; (b): 71 (2015)<br>T: (a): 90; (b): 80 (2020) | Annual sector performance report | By 2020, there is a strengthened national and subnational capacity to legislate, plan, coordinate and budget gender-responsive and inclusive social protection measures and programmes benefiting all girls and boys aged 6 to 10 years in a child-friendly and disaster-resilient environment.<br>By 2020, national and subnational education, WASH and protection systems have the technical, management and financial capacities to provide high-quality learning, services and protection against violence to girls and boys, including children with disabilities and children in hard-to-reach areas and in emergency and non-emergency situations.<br>By 2020, parents and communities have improved capacity and knowledge on key care and protective behaviours that promote the well-being of primary school-aged children. | Education sector-wide approach, Ministry of Social Welfare | 20 000 | 37 500 | 57 500 |
| | Children (1 to 14 years) reporting physical violence (percentage)<br>B: 66 (2013)<br>T: 50 (2020) | MICS | | | | | |
| | Girls and boys achieving nationally defined learning competencies in grade 5 in Bangla and mathematics (percentage)<br>Bangla:<br>B: 25 (2013)<br>T: 50 (2020)<br>Mathematics:<br>B: 26 (2013)<br>T: 50 (2020) | National School Assessment Report | | | | | |

| *UNICEF outcomes* | *Key progress indicators, baselines (B) and targets (T)* | *Means of verification* | *Indicative country programme outputs* | *Major partners, partnership frameworks* | *Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)* | | |
|---|---|---|---|---|---|---|---|
| | | | | | *RR* | *OR* | *Total* |
| 3. By 2020, adolescent girls and boys in Bangladesh, especially the most disadvantaged, access and utilize high-quality basic social services in a safe and protected environment, and are resilient and empowered as active agents of change. | Secondary school net attendance adjusted ratio (percentage)<br>B: 46 (2013)<br>T: 100 (2020)<br>Girls:<br>B: 52 (2013)<br>T: 100 (2020)<br>Boys:<br>B: 40 (2013)<br>T: 100 (2020) | MICS, DHS | By 2020, ministries have increased capacity to plan, budget, coordinate, implement and monitor a comprehensive national cross-sectoral strategy for the effective and equitable access of adolescent girls and boys to their rights.<br>By 2020, the Government has increased capacity to expand and deliver a package of quality services for adolescent boys and girls, including during disasters and emergencies.<br>By 2020, families and communities have strengthened capacity to support the improved and equitable development of adolescent girls and boys and to protect adolescent rights, with a focus on ending harmful social practices and promoting the uptake of new behaviours.<br>By 2020, adolescent boys and girls from selected communities are engaged to develop desired behaviours and facilitate action to eliminate harmful social norms and practices, with a focus on ending child marriage. | National strategy for adolescents, sector-specific strategies and the costed National Action Plan to End Child Marriage | 20 000 | 55 000 | 75 000 |
| | Percentage of girls (15 to 19 years) currently married<br>B: 34 (2013)<br>T: 20 (2020) | MICS, DHS | | | | | |
| | Percentage of adolescent girls (15 to 19 years) with low body mass index (<18.5 kg/m$^2$)<br>B: 25 (2011)<br>T: 20 (2020) | Bangladesh Demographic and Health Survey | | | | | |
| | Percentage of adolescents (15 to 19 years) with comprehensive knowledge about HIV<br>B: 19 (2013)<br>T: 50 (2020) | MICS | | | | | |

| *UNICEF outcomes* | *Key progress indicators, baselines (B) and targets (T)* | *Means of verification* | *Indicative country programme outputs* | *Major partners, partnership frameworks* | *Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)* | | |
|---|---|---|---|---|---|---|---|
| | | | | | *RR* | *OR* | *Total* |
| 4. By 2020, an enhanced policy environment and national and sub-national systems are in place for the realization of child rights, with a focus on equity, guided by knowledge and evidence. | Government spending as a percentage of budget on social sector interventions for children<br>B: 11.4 (2013)<br>T: To be determined (under discussion with Government as part of ongoing child-focused budgeting programme) | National budget estimates (Ministry of Finance) | By 2020, partners have increased awareness and capacity to advocate, innovate, engage communities and allocate resources to issues that affect the realization of the rights of the child.<br>By 2020, government partners have increased capacity to monitor the situation of children and their multidimensional vulnerabilities and risks.<br>By 2020, existing decentralized structures have increased capacity to plan, monitor, implement and evaluate interventions that address children's issues. | Convention on the Rights of the Child, Children Act 2013 | 20 000 | 20 000 | 40 000 |
| | Number and proportion of districts, upazilas and unions that have integrated plans for children that are funded at 50 per cent<br>District<br>B: 31 per cent or 20 (2015)<br>T: 62 per cent or 40 (2020)<br>Upazila<br>B: 12 per cent or 60 (2015)<br>T: 40 per cent or 195 (2020)<br>Union<br>B: 6 per cent or 300 (2015)<br>T: 40 per cent or 1,800 (2020) | Integrated plans, local capacity-building and community empowerment programme annual review/Economic Relations Division report | | | | | |
| Cross Sectoral | | | | | 15 000 | 27 000 | 42 000 |
| **Total resources** | | | | | **90 000** | **250 000** | **340 000** |